

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
or each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 103

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

National Emergency Medicine Political Action Committee

A. Full Name (Last, First, Middle Initial)

Dr. Angelo L Falcone

Mailing Address

21608 English Meadow Pl

City

State

Zip Code

Gaithersburg

MD

20882-1350

FEC ID number of contributing
federal political committee.

C

Name of Employer
Shady Grove Adventist Hosp
ED

Occupation

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 12835689

Amount of Each Receipt this Period

500.00

B. Full Name (Last, First, Middle Initial)

Dr. Gregg Stephen Pollander

Mailing Address

8625 Castle Creek Dr

City

State

Zip Code

Ft Wayne

IN

46804-2759

FEC ID number of contributing
federal political committee.

C

Name of Employer
Professional Emerg Phys
Inc

Occupation

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

730.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 12835710

Amount of Each Receipt this Period

365.00

C. Full Name (Last, First, Middle Initial)

Dr. Vincent H Knauf, II

Mailing Address

4860 Louise Dr

City

State

Zip Code

San Diego

CA

92115-1921

FEC ID number of contributing
federal political committee.

C

Name of Employer
Sharp Chula Vista

Occupation

Emergency Physician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y
0 2 / 0 7 / 2 0 0 6

Transaction ID: 12835703

Amount of Each Receipt this Period

365.00

SUBTOTAL of Receipts This Page (optional)

1230.00

TOTAL This Period (last page this line number only)